| Effective December 29, 1999  |  |   |                  |   |                  |                |                                |                        |    |  |                        |     |
|--|--|---|------------------|---|------------------|----------------|--------------------------------|------------------------|----|--|------------------------|-----|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                  |   |                  |                | SMALL ENTITY OTHER THAN        |                        |    |  |                        |     |
| FC   | R  | NUMB                                      | ER FILED         | NUMBER 6                                    | XTRA             | R/             | ATE                            | FEE                    |    | RATE   | FEE                    |     |
| BÁ   | SIC FEE  |   | er.<br>A marin d |   | *                | ر.<br>ادر ۲۰ ش | <b>y</b>                       | 345.00                 | OR |  | 690.00                 |     |
| TO   | TAL CLAIMS                                     | 5   | minus 2          | 0= •  |                  | X              | 9=                             | ,                      | OR | X\$18=   |                        |     |
| INC  | EPENDENT CL                                    | AIMS /                                    | minus 3 = :      |   |                  |                | 39=                            |                        | OR | X78=   |                        |     |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                  |   |                  |                | 30=                            |                        | OR | +260=  |                        |     |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                  |   |                  |                | TAL                            |                        | OA | TOTAL  | 6904                   |     |
| CLAIMS AS AMENDED - PART II  |  |   |                  |   |                  |                | OTHER<br>SMALL ENTITY OR SMALL |                        |    |  |                        |     |
| _  | 7/015753                                       | (Column 1)<br>CLAIMS                      |                  | (Column 2)<br>HIGHEST                       | (Column 3)       |                | IALL                           | ADDI-                  |    | J. II. ALL                                       | ADDI-                  |     |
| ENT A  | 411  | REMAINING<br>AFTER<br>AMENDMENT           |                  | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | R/             | ATE                            | TIONAL<br>. FEE        |    | RATE   | TIONAL<br>FEE          |     |
| AMENDMENT  | Total  | . 35                                      | Minus            | .30   | = 15             | X              | § 9=                           |                        | OR | X\$18=   | 270                    | (9) |
| AME  | Independent                                    | - //                                      | Minus            | 3   | -8               | X              | 39=                            |                        | OR | X78=   | 672                    | 1   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                  |   |                  |                | 30≟                            |                        | OR | +260 <u>÷</u>                                    |                        |     |
| - <del>:</del>   |  |   |                  |   |                  |                | TOTAL<br>T. FEE                |                        | OR | TOTAL<br>ADDIT, FEE                              |                        |     |
|  |  | (Column 1)                                |                  | (Column 2)                                  | (Column 3)       | ,              |                                | ·                      |    |  |                        |     |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | R              | ATE                            | ADDI-<br>TIONAL<br>FEE |    | RATE   | ADDI-<br>TIONAL<br>FEE |     |
|  | Total  | . 20                                      | Minus            | · 35  | 5                | X              | <b>9=</b>                      |                        | OR | X\$18=   |                        |     |
|  | Independent                                    | . 10                                      | Minus            | ••• ) }                                     |                  | X              | 39=                            |                        | OR | X78=   | Slo                    |     |
| $\vdash$   | FIRST PHESE                                    | NTATION OF                                | MULTIPLE DEI     | PENDENT CLAIM                               |                  | +1             | 30=                            |                        | OR | +260=  |                        |     |
|  | 2-21   | -OH                                       |                  |   |                  |                | TOTAL<br>T. FEE                |                        | OR | TOTAL<br>ADDIT, FEE                              | R/                     |     |
| (Column 1) (Column 2) (Column 3)   |  |   |                  |   |                  |                |                                |                        |    |  |                        |     |
| AMENDMENT C.   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN  | 1000             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | R              | ATE.                           | ADDI-<br>TIONAL<br>FEE |    | RATE   | ADDI-<br>TIONAL<br>FEE |     |
|  | Total  | .20                                       | Minus            |   | =                | X              | <b>9=</b> ·                    |                        | OR | X\$18=   |                        |     |
| ME   | Independent                                    | . 10                                      | Minus            | "10   | ₹ <b>/</b>       | X              | 39=                            |                        | OR | X78₽   | 425                    |     |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |   |                  |                |                                |                        |    | <del>                                     </del> |                        | 1   |
|  |  |   |                  |   |                  |                |                                |                        | OR | +260 <del>=</del>                                | <u> </u>               | 1   |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |   |                  |                |                                |                        |    |  |                        | )   |

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Application or Docket Number

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